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sufficient funds will always be available, not only for ordinary purposes, but also for any emergencies that may arise.

The health of the city has been good during the past week; no contagious diseases have been officially reported, although the sanitary condition remains the same.

Mortuary statistics will be submitted with my next report.

ECUADOR.

Reports from Guayaquil—Yellow fever—Mortality for November, 1904—Inspection of vessels.

Acting Assistant Surgeon Gruver reports, December 2 and 9, as follows:

Week ended November 30, 1904. Present officially estimated population, 60,000. Mortality from all causes, 48, as follows: Yellow fever, 1; pernicious fever, 5; fever (without classification), 5; grippe, 3; enteric diseases, 11; tuberculosis, 7; from all other causes, 16.

During the month ended November 30, 1904, there were 189 deaths, of which 3 were from yellow fever and 24 from tuberculosis. For the same period last year there were 212 deaths, of which 1 was from yellow fever and 30 were from tuberculosis.

During the week ended November 30, there were 3 vessels fumigated, 17 passengers and 33 pieces of baggage inspected; 3 immune certificates and 5 bills of health issued, as follows: November 28, steamship *Chile*, from Chilean and Peruvian ports, cleared for Ancon, Canal Zone, with 8 cabin and 4 steerage passengers from Guayaquil. Three cabin and 1 steerage passengers for Guayaquil were put in quarantine. November 30, steamship *Anubis*, from Hamburg via South American ports, cleared for San Francisco; brought 1 passenger; quarantined; no passengers from here. Same date, steamship *Neko*, from Hamburg via South American ports cleared for San Francisco; no passengers; took 5 steerage passengers. These 3 vessels were fumigated. On the same date the steamship *Ecuador* cleared for Panama and Ancon, Canal Zone, taking a bill of health for each place; crew, 58; passengers, 19; all told, 77.

Yellow-fever cases brought from vicinity of Puerto Bolivar, port of call for vessels bound to Panama—Yellow-fever case on steamship Limari, at Puna, from Panama—Improvement in quarantine methods—Smallpox at Santa Elena, coast town—Plague in Peru.

Week ended December 7, 1904. Mortality from all causes, 56, as follows: Yellow fever, 2; paludic fever, 1; pernicious fever, 1; fever (without classification), 4; smallpox, 3; grippe, 3; enteric diseases, 7; tuberculosis, 9; from all other causes, 26.

On December 4 the steamship *Tucapel* cleared for Ancon, Canal Zone, with 6 cabin and 13 steerage passengers from this port. Thirteen cabin and 1 steerage passengers from ports south were placed in quarantine to complete the required time from ports of last exposure. This vessel was fumigated with sulphur. Nineteen passengers and 78 pieces of baggage were inspected; 1 immune certificate and 1 bill of health were issued.

Besides the 2 deaths reported above from yellow fever, there are several cases now in the lazaretto. Two were brought from Machala, a small town fifteen minutes distant by rail from Puerto Bolivar, its seaport, where the coasting vessels which ply between here and Panama stop. No case of yellow fever is known to have originated in this city during the past two months.

On December 4 the steamship *Limari* arrived at Puna with a case of suspicious fever on board. This vessel came from Panama and was en route to Valparaiso. The next day, fourth day from Panama, she was allowed to come up the river to Guayaquil. I saw the case with the port physician, who diagnosed it yellow fever. The man, a Syrian deck passenger, gave a history of having been in Colon for two days and having become ill on the day of departure from Panama. I could not obtain previous history, as the man spoke neither English nor Spanish. The symptoms presented and the meager history given were nevertheless of such a character as to leave no doubt of the accuracy of the diagnosis made. The man was placed on a lighter and quarantined some distance out of Puna. The quarters occupied were fumigated and the vessel was received in free pratique. This is a distinct improvement over methods which obtained here previously, when a vessel which arrived with a case of yellow fever on board was quarantined and held incommunicado for a period of ten days. The change has been generally commented on and has created a favorable impression among the shipping and traveling public.

The deaths from smallpox reported this week all originated here or in this immediate vicinity, and were among very young children, 1 year of age and under. There is little doubt that the infection was brought originally from Santa Elena, a small coast town about eighteen hours distant by water from here; also in the itinerary of the coasting steamers plying between here and the Isthmus. I mentioned this place as the probable source of infection of the case of smallpox reported two weeks ago. Since then the Santa Elena authorities have applied to the superior board of health for assistance in combating the spread of this disease, which they reported as gaining headway. From close inquiry I learn that smallpox prevails in coast towns between here and the Isthmus, and thus becomes a menace to the health there. A general vaccination has been ordered.

No case of grano d'oro has occurred since that reported November 25. The board of health, however, has adopted very stringent regulations to control its spread should other cases occur.

Because of the cases of yellow fever which have been brought into Guayaquil from the surrounding territory and the belief that this city is thus kept infected, the superior board of health has requested the supreme government to appropriate money for the erection and maintenance of a hospital at Yaguache and Bucay, two small stations 14 and 5½ miles, respectively, from Guayaquil on the Guayaquil and Quito Railroad, to which all cases of yellow fever which occur outside the city would be removed instead of being brought into the city, as is now done. I believe that this would be a valuable sanitary reform, and one which would do much to rid Guayaquil and the neighboring territory from yellow-fever infection. Altogether the board of health, composed of active and progressive men, evidences a laudable desire to accomplish much needed sanitary reform along modern lines during

its term of office. I may add that those in responsible authority enforce the sanitary regulations irrespective of person.

Guadalupe, a small inland town in northern Peru, near Pacasmayo, is reported (by cable) infected with plague.

GERMANY.

Report from Berlin—Plague and cholera in various countries.

Consul-General Mason reports, December 9, as follows:

Plague.

Egypt.—During the period from November 19 to 26 there were registered in the Tukh district, Province of Kaliubieh, 2 fresh cases of plague and 2 deaths.

Cholera.

Russia.—According to an official report dated November 28 cholera has increased in the Caucasus considerably during the period from November 16 to 22, cases having also been recorded recently in the government district of Jelisavetpol and in the city of Tiflis. The increase in the number of cases is apparently owing to the return of workmen from Persia, as it is mainly among these persons that cholera cases occur. The largest number of cases is reported from Erivan, namely, 522 cases and 343 deaths.

Turkey.—According to Official Bulletin No. 46, of November 28, there have been registered 72 fresh cases of cholera and 43 deaths.

Mortality in Germany, month of September, 1904.

The mortality in Germany during the month of September, 1904, shows, according to the bulletin just published by the imperial health office at Berlin, a more favorable status than that of the month of August, statistics being published relating to 315 towns and cities in the German Empire with at least 15,000 inhabitants, but the death rate among infants in 34 districts was very high. Calculated on the year and per thousand of the population, the number of deaths in 71 places amounted to less than 15 per mille, in 136 districts to between 15 and 20 per mille, in 76 cities to between 20.1 and 25 per mille, in 24 towns to between 25.1 and 30, in 5 places to between 30.1 and 35, and in 3 cities to more than 35 per thousand. The lowest rate of mortality was that recorded in Ludwigsburg, in Wurttemberg, viz, 5.5; the highest that of Schwientochlowitz (Upper Silesia), namely, 38.8 per thousand. The suburban district of Berlin, with a death rate of 16.2, includes Deutsch-Wilmersdorf, with 11.8; Steglitz, with 12; Schoneberg, with 12.4; Pankow, 13.1; Charlottenburg, 13.8; Spandau, 14.5; Reinickendorf, 16.3; Gross-Lichterfelde, 16.9; Rixdorf, 21.4, and Boxhagen-Rummelsburg, 33.5 per thousand. The death rate among infants amounted in Koepenick to 353; Reinickendorf, 385, and Weissensee to 476; that is to say, more than a third of every thousand children born.